

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 18
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Association for Homecare Political Action Committee (AAHOMECARE PAC)

Full Name (Last, First, Middle Initial)

A. Joseph Lewarski

Mailing Address 28791 Johnson Dr

City State Zip Code
Wickliffe OH 44092-2651

FEC ID number of contributing
federal political committee.

C

Name of Employer

Invacare

Occupation

VP Clinical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 12 / 2014

Transaction ID : AC819DAB30A8C4C16AB2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Terry Luft

Mailing Address 6611 Springford Ter

City State Zip Code
Harrisburg PA 17111-6988

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central Medical Equipment

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 12 / 2014

Transaction ID : AB775D0992FFF40BFB0C

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Joel Marx

Mailing Address 3041 Kersdale Rd

City State Zip Code
Cleveland OH 44124-5349

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Service Co.

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

04 / 30 / 2014

Transaction ID : AB724DE9C4DA9405C8D9

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)..... ►

3500.00

TOTAL This Period (last page this line number only)..... ►